

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

National Franchise Association PAC (NFA-PAC)

ADDRESS (number and street)

1201 Roberts Boulevard, Suite 100

☐Check if different
than previously
reported. (ACC)

Kennesaw

GA

30144

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00329425

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

05

01

2008

through

05

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Bill Patterson

Signature of Treasurer

Electronically Filed by Bill Patterson

Date

06

14

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Franchisee Association PAC (NFA-PAC)

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	5		0	1		2	0	0	8

To:

M	M		D	D		Y	Y	Y	Y
0	5		3	1		2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		125609.90
(b) Cash on Hand at Beginning of Reporting Period	134067.90	
(c) Total Receipts (from Line 19)	19648.01	63934.62
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	153715.91	189544.52
7. Total Disbursements (from Line 31)	40621.46	76450.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	113094.45	113094.45
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Franchisee Association PAC (NFA-PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	19375.00	57750.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	100.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	19475.00	58000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	19475.00	63000.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	173.01	934.62
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	19648.01	63934.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19648.01	63934.62

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	121.46	1450.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	121.46	1450.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40500.00	75000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	40621.46	76450.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40621.46	76450.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	19475.00	63000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19475.00	63000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	121.46	1450.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	121.46	1450.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Perry Beaton

Mailing Address 3130 Willowridge Rd.
#C

City State Zip Code
Marion IA 52302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beaton Holding Co. LLC

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 0 8

Transaction ID: 80614.C924

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Gregory Dolphin

Mailing Address 17 Washington Ave N

City State Zip Code
Minneapolis MN 55401-1617

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dolphin Real Estate Mgmt.
Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 0 8

Transaction ID: 80614.C930

Amount of Each Receipt this Period

1250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Dennis Erickson

Mailing Address 7401 S 95th Ct

City State Zip Code
Lincoln NE 68526-9667

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Holding Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 0 8

Transaction ID: 80614.C928

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

7250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

William A. Harloe, Jr.

Mailing Address 304 Vale Road

City

Belair

State

MD

Zip Code

21014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harloe Management Corp.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 9 / 2 0 0 8

Transaction ID: 80614.C931

Amount of Each Receipt this Period

625.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Ben Jarratt

Mailing Address PO Box 650728

City

Sterling

State

VA

Zip Code

20165-0728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northern Virginia Group,
Inc.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 9 / 2 0 0 8

Transaction ID: 80614.C929

Amount of Each Receipt this Period

1250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Glenn Levins

Mailing Address 1101 S Rogers Cir
Suite 10

City

Highland Beach

State

FL

Zip Code

33487-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix OrganizationOccupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 80614.C934

Amount of Each Receipt this Period

2750.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Stafford Rastall

Mailing Address 4130 Litadell Rock Rd. NE

City

Ryland

State

AL

Zip Code

35767

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kristie Co.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 7 / 2 0 0 8

Transaction ID: 80614.C932

Amount of Each Receipt this Period

1250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Todd Schuster

Mailing Address 64 Holland Road

City

Cataula Road

State

GA

Zip Code

31604

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Franchisee Assoc-
iation

Occupation
Burger King Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 80614.C927

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Richard Smith

Mailing Address 2904 Oak Shadow Dr.

City

Herndon

State

VA

Zip Code

20171

FEC ID number of contributing
federal political committee.

C

Name of Employer
Panda Foods LLC

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 80614.C925

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 16

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

David Williams

Mailing Address 10238 So. Weeping Willow Dr.

City

Sandy

State

UT

Zip Code

84070

FEC ID number of contributing
federal political committee.

C

Name of Employer
HB Boys, LCOccupation
Franchisee

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

Transaction ID: 80614.C933

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

19375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 16

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

823.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 80614.C936

Amount of Each Receipt this Period

62.00

Interest Received

SUBTOTAL of Receipts This Page (optional)

62.00

TOTAL This Period (last page this line number only)

62.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Wachovia Securities (1st Union Natl Bk)

Mailing Address NC8502
P.O. Box 563966

City Charlotte State NC Zip Code 28262-3966

Purpose of Disbursement
Bank Service Charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80614.E570

Date of Disbursement

05 / 09 / 2008

Amount of Each Disbursement this Period

4.00

BANK SERVICE CHARGE

B. Full Name (Last, First, Middle Initial)
NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
Monthly Merchant Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80614.E569

Date of Disbursement

05 / 01 / 2008

Amount of Each Disbursement this Period

51.08

MONTHLY MERCHANT FEE

SUBTOTAL of Disbursements This Page (optional)

55.08

TOTAL This Period (last page this line number only)

55.08

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Bachman for Congress	Transaction ID: 80614.E554
Mailing Address PO Box 25950	Date of Disbursement
City Woodbury State MN Zip Code 55125-0950	<div> <div>MM / DD / YY</div> <div>05 / 02 / 2008</div> </div>
Purpose of Disbursement DIRECT CONTRIBUTION	Amount of Each Disbursement this Period
Candidate Name MICHELE M BACHMANN	<div> <div></div> <div>2000.00</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type DIRECT CONTRIBUTION
B. Full Name (Last, First, Middle Initial) Chambliss for Senate	Transaction ID: 80614.E566
Mailing Address PO Box 12469	Date of Disbursement
City Atlanta State GA Zip Code 30355-2469	<div> <div>MM / DD / YY</div> <div>05 / 02 / 2008</div> </div>
Purpose of Disbursement DIRECT CONTRIBUTION	Amount of Each Disbursement this Period
Candidate Name SAXBY CHAMBLISS	<div> <div></div> <div>2500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type DIRECT CONTRIBUTION
C. Full Name (Last, First, Middle Initial) Coleman for Senate	Transaction ID: 80614.E555
Mailing Address 680 Transfer Rd Ste A	Date of Disbursement
City Saint Paul State MN Zip Code 55114-1487	<div> <div>MM / DD / YY</div> <div>05 / 02 / 2008</div> </div>
Purpose of Disbursement DIRECT CONTRIBUTION	Amount of Each Disbursement this Period
Candidate Name NORM COLEMAN	<div> <div></div> <div>5000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart	Transaction ID: 80614.E556 Date of Disbursement																				
Mailing Address 8770 SW 72nd #421	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	0	8												
City Miami State FL Zip Code 33173-3512	Amount of Each Disbursement this Period																				
Purpose of Disbursement DIRECT CONTRIBUTION	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name LINCOLN DIAZ-BALART	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 21	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	DIRECT CONTRIBUTION																				
B. Full Name (Last, First, Middle Initial) People for Phil English	Transaction ID: 80614.E557 Date of Disbursement																				
Mailing Address PO Box 1940	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	0	8												
City Erie State PA Zip Code 16507-0940	Amount of Each Disbursement this Period																				
Purpose of Disbursement DIRECT CONTRIBUTION	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name PHILIP S ENGLISH	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	DIRECT CONTRIBUTION																				
C. Full Name (Last, First, Middle Initial) Keller for Congress	Transaction ID: 80614.E558 Date of Disbursement																				
Mailing Address PO Box 1453	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	0	8												
City Orlando State FL Zip Code 32802-1453	Amount of Each Disbursement this Period																				
Purpose of Disbursement DIRECT CONTRIBUTION	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name RICHARD A KELLER	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	DIRECT CONTRIBUTION																				

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 16

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
John Kennedy for U.S. Senate, Inc.

Mailing Address PO Box 14861

City State Zip Code
Baton Rouge LA 70898-4861

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
JOHN NEELY KENNEDY

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: LA District: 00

Transaction ID: 80614.E559

Date of Disbursement

05 / 02 / 2008

Amount of Each Disbursement this Period

5000.00

DIRECT CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Friends of Jack Kingston

Mailing Address Norwood Plaza
7360 Skidaway Road

City State Zip Code
Savannah GA 31406-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
JOHN HEDDENS KINGSTON

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: GA District: 01

Transaction ID: 80614.E560

Date of Disbursement

05 / 02 / 2008

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
McConnell Senate Committee 08

Mailing Address PO Box 1496

City State Zip Code
Louisville KY 40201-1496

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
MITCH MCCONNELL

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: KY District: 00

Transaction ID: 80614.E561

Date of Disbursement

05 / 02 / 2008

Amount of Each Disbursement this Period

5000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 16

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Steve Stivers for Congress Mailing Address 211 S 5th St	Transaction ID: 80614.E562 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Columbus State OH Zip Code 43215-5203 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name STEVE STIVERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 15	Amount of Each Disbursement this Period <div>2000.00</div> DIRECT CONTRIBUTION
B. Full Name (Last, First, Middle Initial) Tiberi for Congress Mailing Address 2021 E. Dublin Granville Road Suite 2000 City Columbus State OH Zip Code 43229- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name PATRICK J TIBERI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 12	Transaction ID: 80614.E563 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>2000.00</div> DIRECT CONTRIBUTION
C. Full Name (Last, First, Middle Initial) Ed Tinsley for Congress Mailing Address PO Box 942 City Capitan State NM Zip Code 88316-0942 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name ED TINSLEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 02	Transaction ID: 80614.E564 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>5000.00</div> DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Wicker for Senate

Mailing Address P.O. Box 64

City
Saint Paul

State
MN

Zip Code
55114-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80614.E565

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

40500.00